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	DECLAR	ATION	FOF	R UTILITY OR	Attorney Docket Num	ber	032167.0001	
		DES	SIGN		First Named Inventor		Whalen, Michael J	
	PATI	PATENT APPLICATION (37 CFR 1.63)			COM	MPLETE II	- KNOWN	
		(57 51		.03)	Application Number			
$\boxtimes$	Declaration			Declaration	Filing Date	Novem	nber <b>9</b> , 2001	
	Submitted With Initial	OR		Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Group Art Unit			
	Filing				Examiner Name			

As a below named inventor, I hereby declare that:							
	My residence, post office address, and citizenship are as stated below next to my name						
	I believe I am the names are listed to	original, first and s pelow) of the subje	ole inventor ( ct matter whi	(if only one name is listed ich is claimed and for which	below) or an or th a patent is so	iginal, first ar jught on the i	nd joint inventor (if plural invention entitled
	PORTABL	E CONTAIN	ER FOR I	PAINT, ROLLER	AND BRUS	H	
	the specification of	f which		(Title of the Inve	ention)		
	is attache	ed hereto					
	was filed	on (MM/DD/YYYY	)		as United Sta	ites Applicati	on Number or PCT International
• •	cation Number			and was amended on (M	•		(if applicable)
I here any a	I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above						
l ack	nowledge the duty	to disclose informa	tion which is	material to patentability a	s defined in 37	CFR 1 56	
I hereby claim foreign priority benefits under 35 U S.C 119(a) -(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed							
Prior F	oreign Application			Foreign Filing Date		ority	Certified Copy Attached?
	Number(s)	Count	у	(MM/DD/YYYY)	Not (	Claimed	YES NO
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto							
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.							
<u>.</u>	Application Nur	nber(s)	Filing D	Date (MM/DD/YYYY)		numbers suppleme	al provisional application are listed on a ental priority data sheet 02B attached hereto.

[Page 1 of 2]
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## **DECLARATION - Utility or Design Patent Application**

I hereby claim the benefit under 35 U S.C 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U S C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.														
U.S. Par	ent Appl	ication	or PCT P	arent I	Numbe	er	F			ng Date YYYY)				nt Number cable)
22467  Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.														
As a named invest	S. or PCT	ınternatio	onal applica	ation nur	nbers a	re listed o	n a su	ppleme	ntal	priority de	ta sheet	PTO/SB/0	)2B atta	ched hereto.
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Kimberly A.	. Chast	teen 36,755												
Additional reg	gistered pr	actitione	r(s) named	on supp	lementa	al Registe	red Pi	actition	er In	formation	sheet PT	O/SB/020	attach	ed hereto
						(	OR 🛛	Correspor	ndence	address below				
Name	Kimbe	erly A.	Chaste	en										
Address	Willian	ns Mu	llen Cla	rk & C	Oobbii	ns								
Address	One C	Old Oy	ster Poi	nt Roa	ad, S	uite 21	0							
City	Newp	ort Ne	ws			State	VA <b>ZIP</b> 23602							
Country	U.S.A			Teler	ohone	(75	7) 24	19-710	)2	2 Fax (757) 249-5109			5109	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.														
Name of Sole or First Inventor						or								
Given Name (first and middle [if any])					Family Name or Surname									
Michael J. Whalen														
Inventor's Signature									Da	te	11-07-01			
Residence: City Yorktown State			VA		Coun	try	USA		Citize	nship	USA			
Post Office Ad	dress	905 \$	Showalt	er Roa	ad									
Post Office Ad	dress													
City		York	town		State	VA		ZIP	23	3692		Country	US	SA
Additional i	nventors :	are bein	g named o	n the	1 sı	ıpplemer	ntal Ad	ditiona	l Inv	entor(s)	sheet(s)	PTO/SB/	02A att	ached hereto

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#### **DECLARATION**

#### ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

Name of Additional	ame of Additional Joint Inventor, if any:								
Given Nar	me (first and middle [if any])			Family Name or Surname					
	Jeffrey S.				Hov	vard			
Inventor's Signature	Jeffey S. Hon	and			11/07/01				
Residence: City	Yorktown	State	VA	Country	USA	Citizenship	USA		
Post Office Address	115 Harlan Drive								
Post Office Address									
City	Yorktown	State	VA	Zip	23692	Country	USA		
Name of Additional	Name of Additional Joint Inventor, if any:						entor		
Given Name (first and middle [if any])					Family Name	or Surname			
Inventor's Signature						Date			
Residence: City		State		Country		Citizenship			
Post Office Address		<u> </u>							
Post Office Address									
City		State		Zip		Country			
Name of Additional	Joint Inventor, if any:		□ A	☐ A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature						Date			
Residence: City		State		Country		Citizenship			
Post Office Address									
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City		State		Zip		Country			

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# POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	November 9,2001
First Named Inventor	Whalen, Michael J.
Title	Portable Container
Group Art Unit	
Examiner Name	
Attorney Docket Number	032167.0001

Practitioners at Customer Number  OR  Practitioner(s) named below:  Name  Registration Number  Kimberly A. Chasteen  as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.  Please change the correspondence address for the above-identified application to:  The above-mentioned Customer Number.  OR  Practitioners at Customer Number.  Number Bar Code Label here  Address  Address  Address  City  Country  Telephone  I am the:  X Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).	I hereby appoint:	I UNIVERSITATION HAND HER CHOLLEGE			
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Assignee of record of the entire interest. See 37 CFR 3.71.	I am the:				
	X Applicant/Inventor.				
	Assistance of accord of the cutting interest October 51				
SIGNATURE of Applicant or Assignee of Record					
Name Jeffrey S. Howard					
Signature Lipping S. Howard					
Date 11 / 07 / 01					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*					
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### **POWER OF ATTORNEY OR AUTHORIZATION OF AGENT**

Application Number	
Application Number	
Filing Date	november 9,2001
First Named Inventor	Whalen, Michael J.
Title	Portable Container
Group Art Unit	
Examiner Name	
Attorney Docket Number	032167.0001

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X Applicant/Inventor.	
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).	
SIGNATURE of Applicant or Assignee of Record	
Name Michael J. Whalen	
Signature VIIII a his	
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Date //- / O //	
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032167.0001 (37 CFR 1.9(f) & 1.27(b))—INDEPENDENT INVENTOR Applicant, Patentee, or Identifier: Whalen, Michael J. and Howard, Jeffrey S. Application or Patent No .: Filed: November 9, 2001 Filed or Issued: PORTABLE CONTAINER FOR PAINT, ROLLER AND BRUSH Title: As a below named inventor, I hereby state that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees to the Patent and Trademark Office described in: the specification filed herewith with title as listed above. the application identified above. the patent identified above. I have not assigned, granted, conveyed, or licensed, and am under no obligation under contract or law to assign, grant, convey, or license, any rights in the invention to any person who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e). Each person, concern, or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant convey, or license any rights in the invention is listed below: No such person, concern, or organization exists. Each such person, concern, or organization is listed below. Separate statements are required from each named person, concern, or organization having rights to the invention stating their status as small entities. (37 CFR 1.27) I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b)) Michael J. Whalen Jeffrey S. Howard NAME OF INVENTOR NAME OF INVENTOR NAME OF INVENTOR Signature of inventor Date

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